

Health and Safety Inventory Student Pages



| Exercise Section Questions followed by space for Your Answers | Notes (references, more questions, ideas for action) |
|---|---|
| <p>1. How often is each student required to participate in physical activity during school hours? (e.g., 30 minutes per day, 45 minutes twice a week)</p> | |
| <p>2. What opportunities exist for voluntary participation in physical activity during each school day? (e.g., 30 minute recess, 6 weeks of basketball after school)</p> | |
| <p>3. Are all students eligible and encouraged to participate in school-related athletic activities? (e.g., intramural sports, before and after school programs)</p> | |

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| <p>4. What mechanisms and equipment are available for students to exercise during lunch and other breaks? (e.g., weight room open at all times, free time in the courtyard)</p> | |
| <p>5. What physical fitness events are offered through the school? (e.g., one day fitness celebration, charity race)</p> | |
| <p>6. Does your school provide walking or biking paths for student/staff/community exercise or transportation?</p> | |

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|--|---|
| <p>7. What percentage of school-based physical activity is offered outdoors?</p> | |
| <p>8. How is fitness and wellness part of each grade's curriculum?</p> | |

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| Nutrition Section Questions followed by space for Your Answers | Notes (references, more questions, ideas for action) |
|--|--|
| <p>9. Does your school have vending machines which are accessible to students? If so, what types of foods are available in the machines?</p> | |
| <p>10. What sort of training is required to be a food service manager in a school?</p> | |

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| Nutrition Section Questions followed by space for Your Answers | Notes (references, more questions, ideas for action) |
|--|--|
| <p>11. What percentage of school meals contains:</p> <ul style="list-style-type: none"> A. lean meats? B. low fat dairy products? C. whole grain foods? D. fruits? E. vegetables? | |
| <p>12. What role do students play in decisions about menu planning and serving methods?</p> | |

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| Nutrition Section Questions followed by space for Your Answers | Notes (references, more questions, ideas for action) |
|--|--|
| <p>13. Does your school menu contain nutritional information about the foods that are served?</p> | |
| <p>14. Does your school district participate in a "Farm to School" program using produce grown by local farmers?</p> | |

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| Nutrition Section Questions followed by space for Your Answers | Notes (references, more questions, ideas for action) |
|---|--|
| <p>15. What are the USDA guidelines for labeling foods as "organic"?</p> | |
| <p>16. How is nutrition part of each grade's curriculum?</p> | |

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| Safety & Disease Transmission Section Questions followed by space for Your Answers | Notes (references, more questions, ideas for action) |
|--|--|
| 17. What percentage of time is a school nurse located at your school? | |
| 18. Does your school have a designated first aid room with a sink and toilet? | |
| 19. Where are AEDs (automated external defibrillators) and first aid kits located throughout the school building, buses and grounds? | |

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| Safety & Disease Transmission Section Questions followed by space for Your Answers | Notes (references, more questions, ideas for action) |
|---|--|
| 20. Are students required to wash their hands before meals and at other appropriate times? | |
| | |
| 21. Does your school have a system for tracking student and staff's health-related complaints by date, time, location and symptoms as well as accidents and injuries? | |
| | |
| 22. What is your student immunization rate? | |
| | |

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| Safety & Disease Transmission Section Questions followed by space for Your Answers | | | Notes (references, more questions, ideas for action) |
|--|-----|----|---|
| 23. Does your school have the following written plans and/or policies? | YES | NO | |
| A. safety plan for staff, students and visitors? | | | |
| B. security plan? | | | |
| C. emergency/disaster/terrorism plan? | | | |
| D. chemical hygiene, handling and spill plan? | | | |
| E. bloodborne pathogen and biological spill plan? | | | |
| F. emergency nurse services plan? | | | |
| G. playground safety plan? | | | |
| H. policies for limiting outdoor activities due to temperature extremes or high levels of ozone or ultraviolet radiation ? | | | |
| I. policies for managing allergies and asthma including Epi-Pen use and latex allergies? | | | |
| J. policy for administering medication/self-medication? | | | |
| K. lock-out/tag-out policy? | | | |
| L. policy for equipment safety, personal protective equipment and/or ergonomics? | | | |

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| Safety & Disease Transmission Section Questions followed by space for Your Answers | Notes (references, more questions, ideas for action) |
|---|--|
| <p>24. How is safety and disease transmission part of each grade's curriculum?</p> | |
| <p>25. Who conducted this inventory (e.g., Mrs. Frost's second period Health class with help from Mr. Wright, principal, and Mrs. Baker, cafeteria supervisor)?</p> | |